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PTOL-413A (09-04)
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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Applicant Initiated Interview Request Form							
		- Line Assertion		Attorney D	ocket No.:	P-9894-US	
Application No.: 10/620,631		First Named Applicant	::	ARIDOR, Yariv			
Examiner: PRICE, NA	Art Unit: 2194				f Application: FOA Pending		
Tentative Participants	5:						
(1) Naim Shichrur, Reg. Number 56,248			(2)	(2) Dekel Shiloh			
(3) Joel Vidal			(4)				
Proposed Date of Interview: April, 17 2008			Pro Tin	oposed ne:	10	(AM)	
(1) 🛛 Telephonic	(2) Pers	onal (3) 🗆 V	ideo	Conference	e		
Exhibit To Be Shown or Demonstrated:							
Issues To Be Discussed							
Issues (Rej., Obj., etc.)	Claims / Fig. #s	Prior Art	Dis	scussed	Agreed	Not Agreed	
(1) §103 Rejection	1	Carlson (6,697,849)					
(2)		Choquier (5,951,694)	_				
(3)		Watt (2003/0126202)					
☑ Continuation Sheet	Attached						
Brief Description of Arguments to be Presented: Applicants' representatives respectfully request clarification of the 103 rejection of independent claim 1 in view of Carlson, Choquier, and Watt. In particular, clarification is respectfully requested of:							
(1) How exactly does the prior art references teach: "capable of managing said multiple application complexes of different							
types based on configuration information provided by a plugin for each respective application-complex type"							
(2) How exactly does the prior art references teach: "according to the configuration information provided by said plugin"							
An interview was conducted on the above-identified application on							
NOTE: This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP §713.01). This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.							
Najin Shichrur Reg. Number 56,248				(Examiner/SPE Signature)			

Telephone: (212) 608-4141/

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Co0mmerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Sample Form (09-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re	Application of:					
Application No. 10/620,631						
Filed:						
July 16, 2003						
Title: METHOD AND SYSTEM FOR MANAGING MULTI-TIER APPLICATION COMPLEXES						
Attori	ney Docket No. Art Unit:	2194				
The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:						
	Name	Registration Number				
	Naim Shichrur	56,248				
		·				
This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.						
. SIGNATURE of Practitioner of Record						
Signa		Date				
Name	Suzanne Erez	Registration No., if applicable 46, 688				
Telep	hone 972-4-829-6069					

This form offers a sample or suggested format for an authorization for an agent. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.